In re	Norma Jean Kimbrue	
Case N	Debtor(s)	According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement):
(If known)		□The presumption arises.
		■The presumption does not arise.
		☐The presumption is temporarily inapplicable.

# CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

	Part I. MILITARY AND NON-CONSUMER DEBTORS		
1A	<b>Disabled Veterans.</b> If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.		
	<b>Declaration of Disabled Veteran.</b> By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).		
1B	<b>Non-consumer Debtors.</b> If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.		
	□Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.		
Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after Septem 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and comprequired information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumatemporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion pare not required to complete the balance of this form, but you must complete the form no later than 14 days after the dwhich your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in you before your exclusion period ends.			
1C	Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard		
	a.  was called to active duty after September 11, 2001, for a period of at least 90 days and remain on active duty /or/ was released from active duty on, which is less than 540 days before this bankruptcy case was filed;  OR		
	b.   am performing homeland defense activity for a period of at least 90 days /or/  performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.		

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		Part II. CALCULATION OF M	ON	NTHLY INCO	ME FOR § 707(b)(	7) E	XCLUSION	
	Mari	tal/filing status. Check the box that applies a	nd c	complete the balance	e of this part of this state	ement	as directed.	
	a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.							
2	b. 🗆	Married, not filing jointly, with declaration o 'My spouse and I are legally separated under a purpose of evading the requirements of § 7076 for Lines 3-11.	f sep appl	parate households. licable non-bankrup	By checking this box, do	nd I aı	re living apart of	her than for the
	с. 🗆	Married, not filing jointly, without the declar "Debtor's Income") and Column B ("Spou				abov	e. Complete bo	th Column A
		Married, filing jointly. Complete both Colur				Spous	se's Income'') fo	or Lines 3-11.
	All fig	gures must reflect average monthly income re-	ceiv	ed from all sources	, derived during the six		Column A	Column B
		dar months prior to filing the bankruptcy case ling. If the amount of monthly income varied					Debtor's	Spouse's
		onth total by six, and enter the result on the a			you must divide the		Income	Income
3		s wages, salary, tips, bonuses, overtime, con				\$	0.00	\$
	Incon	ne from the operation of a business, profess	ion	or farm. Subtract	Line b from Line a and			
		the difference in the appropriate column(s) of						
		ess, profession or farm, enter aggregate numb nter a number less than zero. <b>Do not include</b>						
4		b as a deduction in Part V.	any	part of the busine	ess expenses entereu on			
				Debtor	Spouse	1		
	a.	Gross receipts	\$	0.00				
	b.	Ordinary and necessary business expenses	\$	0.00	<u> </u>		0.00	Φ
	c.	Business income		btract Line b from		\$	0.00	\$
	the ap	s and other real property income. Subtract lapropriate column(s) of Line 5. Do not enter to the operating expenses entered on Line by	a nu	mber less than zero  a deduction in Par	o. Do not include any t V.	1		
5		Cross respirits	d.	Debtor	Spouse			
	a. b.	Gross receipts Ordinary and necessary operating expenses	\$	0.00				
	c.	Rent and other real property income	_	btract Line b from		\$	0.00	\$
6	Inter	est, dividends, and royalties.				\$	0.00	\$
7	Pensi	on and retirement income.				\$	0.00	\$
0	exper	amounts paid by another person or entity, onses of the debtor or the debtor's dependent	ts, ir	ncluding child sup	port paid for that			
8		ose. Do not include alimony or separate maint e if Column B is completed. Each regular pa						
		ayment is listed in Column A, do not report the				\$	0.00	\$
		iployment compensation. Enter the amount i		-				
		ever, if you contend that unemployment comp						
9	benefit under the Social Security Act, do not list the amount of such compensation in Column A							
		but instead state the amount in the space belo	w:			1		
		mployment compensation claimed to benefit under the Social Security Act Debtor	r \$	<b>0.00</b> Spo	ouse \$	\$	0.00	\$
10	on a s spous maint receiv	ne from all other sources. Specify source and separate page. Do not include alimony or separate page. Be if Column B is completed, but include all tenance. Do not include any benefits received as a victim of a war crime, crime against hastic terrorism.	ara oth l un	te maintenance pa er payments of ali- der the Social Secu anity, or as a victim	yments paid by your mony or separate rity Act or payments a of international or			
	 	Nimony	d.	Debtor	Spouse			
	a. <b>A</b> b.	Alimony	\$	300.00	\$			
		and enter on Line 10	Ψ	l	ĮΨ	\$	300.00	\$
		Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if					300.00	Ψ
11		nn B is completed, add Lines 3 through 10 in				\$	300.00	\$

12	<b>Total Current Monthly Income for § 707(b)(7).</b> If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.		300.00		
	Part III. APPLICATION OF § 707(b)(7) EXCLUSION				
13	<b>Annualized Current Monthly Income for § 707(b)(7).</b> Multiply the amount from Line 12 by the number 12 and enter the result.	\$	3,600.00		
14	<b>Applicable median family income.</b> Enter the median family income for the applicable state and household size. (This information is available by family size at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)				
	a. Enter debtor's state of residence: MI b. Enter debtor's household size: 1	\$	44,116.00		
	Application of Section 707(b)(7). Check the applicable box and proceed as directed.	•			
15	■ The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII.				
	□ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.				

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

	Part IV. CALCULA	ATION OF CUR	REN	Γ MONTHLY INCOM	ME FOR § 707(b)(2	2)
16	Enter the amount from Line 12.					\$
17	Marital adjustment. If you checked Column B that was NOT paid on a dependents. Specify in the lines belonger's tax liability or the spouse's amount of income devoted to each not check box at Line 2.c, enter zeroa.	regular basis for the low the basis for excl support of persons opurpose. If necessary	househouding the	ld expenses of the debtor or e Column B income (such a n the debtor or the debtor's	the debtor's s payment of the dependents) and the	
	b.			\$ \$		
	c. d.			\$ \$		
	Total and enter on Line 17			<u>.</u>		\$
18	Current monthly income for § 70	7(b)(2). Subtract Lin	e 17 fro	m Line 16 and enter the resu	alt.	\$
	Part V. C.	ALCULATION	OF D	EDUCTIONS FROM	INCOME	
	Subpart A: De	ductions under Sta	andard	s of the Internal Revenu	ie Service (IRS)	
19A	that would currently be allowed as exemptions on your federal income tax return, plus the number of any				\$	
19B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.					
	Persons under 65 year	rs of age	2	Persons 65 years of age	or older	
	<ul><li>a1. Allowance per person</li><li>b1. Number of persons</li></ul>		a2.	Allowance per person Number of persons		
	c1. Subtotal		c2.	Subtotal		\$
20A	Local Standards: housing and uti Utilities Standards; non-mortgage of available at www.usdoj.gov/ust/ or the number that would currently be any additional dependents whom you	expenses for the appli from the clerk of the allowed as exemptio	cable co bankruj	ounty and family size. (This otcy court). The applicable fa	information is amily size consists of	\$

20B	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero.  [a. IRS Housing and Utilities Standards; mortgage/rental expense">					
	b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42	\$				
	c. Net mortgage/rental expense	Subtract Line b from Line a.	\$			
21	<b>Local Standards: housing and utilities; adjustment.</b> If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:					
	Local Standards: transportation; vehicle operation/public transpor You are entitled to an expense allowance in this category regardless of vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expense	whether you pay the expenses of operating a	\$			
22A	included as a contribution to your household expenses in Line 8.					
	If you checked 0, enter on Line 22A the "Public Transportation" amou Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Standards: Transportation for the applicable number of vehicles in the Census Region. (These amounts are available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or	\$				
22B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for you public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)					
23	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)  □ □ □ or more.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter					
	the result in Line 23. <b>Do not enter an amount less than zero.</b>					
	a. IRS Transportation Standards, Ownership Costs  Average Monthly Payment for any debts secured by Vehicle	\$				
	b. 1, as stated in Line 42	\$				
		Subtract Line b from Line a.	\$			
24	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero.					
		\$				
	b. Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$				
		Subtract Line b from Line a.	\$			
25	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.					

26	Other Necessary Expenses: involuntary deductions for eddeductions that are required for your employment, such as r Do not include discretionary amounts, such as voluntary	retirement contributions, union dues, and uniform costs.	\$		
27	Other Necessary Expenses: life insurance. Enter total average life insurance for yourself. Do not include premiums for it any other form of insurance.	\$			
28	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.				
29	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.				
30	Other Necessary Expenses: childcare. Enter the total averabilidcare - such as baby-sitting, day care, nursery and presc		\$		
31	Other Necessary Expenses: health care. Enter the total as health care that is required for the health and welfare of you insurance or paid by a health savings account, and that is in include payments for health insurance or health savings	excess of the amount entered in Line 19B. <b>Do not</b>	\$		
32	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you				
33	Total Expenses Allowed under IRS Standards. Enter the	total of Lines 19 through 32.	\$		
	<del>-</del>				
34		\$			
		5			
		5	\$		
	Total and enter on Line 34.	·			
	If you do not actually expend this total amount, state you below:  \$	r actual total average monthly expenditures in the space			
35	Continued contributions to the care of household or family expenses that you will continue to pay for the reasonable an ill, or disabled member of your household or member of you expenses.	nd necessary care and support of an elderly, chronically	\$		
36	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.				
37	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.				
38	Education expenses for dependent children less than 18. actually incur, not to exceed \$147.92* per child, for attendar school by your dependent children less than 18 years of age documentation of your actual expenses, and you must expenses and not already accounted for in the IRS Standards.	nce at a private or public elementary or secondary  You must provide your case trustee with plain why the amount claimed is reasonable and	\$		

<sup>\*</sup> Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

39	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.					\$	
40			Enter the amount that you will conting ganization as defined in 26 U.S.C. § 1			e form of cash or	\$
41	Total	Additional Expense Deduction	s under § 707(b). Enter the total of I	Lines	34 through 40		\$
		S	ubpart C: Deductions for De	bt F	Payment		
42	<b>Future payments on secured claims.</b> For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, and state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.						
		Name of Creditor	Property Securing the Debt	A	verage Monthly Payment	Does payment include taxes or insurance?	
	a.			\$		☐ gles ☐ flo	
				1	Total: Add Lines		\$
43	Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.    Name of Creditor					\$	
44	priori		ims. Enter the total amount, divided b claims, for which you were liable at t as those set out in Line 28.				\$
			If you are eligible to file a case under the amount in line b, and enter the res				
45	issued by the Executive Office for United States Trustees. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)				\$		
46	c. Total		•		uni iviuitipij 22ii		\$
	46   Total Deductions for Debt Payment. Enter the total of Lines 42 through 45.   Subpart D: Total Deductions from Income						Ψ
47	Total						\$
47						φ	
	Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION						
48	Enter the amount from Line 18 (Current monthly income for § 707(b)(2))					\$	
49			al of all deductions allowed under §				\$
50	Mon	thly disposable income under §	<b>707(b)(2).</b> Subtract Line 49 from Line	e 48 a	and enter the resu	ılt.	\$
51	<b>60-month disposable income under § 707(b)(2).</b> Multiply the amount in Line 50 by the number 60 and enter the result.					\$	

(							
	Initial presumption determination. Check the applicable box and	d proceed as directed.					
52	☐ The amount on Line 51 is less than \$7,025*. Check the box for "The presumption does not arise" at the top of page 1 of this statement and complete the verification in Part VIII. Do not complete the remainder of Part VI.						
02	☐The amount set forth on Line 51 is more than \$11,725* Check statement, and complete the verification in Part VIII. You may also						
	☐The amount on Line 51 is at least \$7,025*, but not more than	<b>a \$11,725*.</b> Complete the remainder of Part V	I (Lines 53 through 55).				
53	Enter the amount of your total non-priority unsecured debt		\$				
54	Threshold debt payment amount. Multiply the amount in Line 5	53 by the number 0.25 and enter the result.	\$				
	Secondary presumption determination. Check the applicable bo	ox and proceed as directed.					
55	□ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.						
	The amount on Line 51 is equal to or greater than the amount page 1 of this statement, and complete the verification in Part VIII		mption arises" at the top of				
	Part VII. ADDITIONAL	EXPENSE CLAIMS					
56	Other Expenses. List and describe any monthly expenses, not oth you and your family and that you contend should be an additional 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separeach item. Total the expenses.	deduction from your current monthly income	e under §				
	Expense Description	Monthly A	mount				
	a.	\$					
	b.	\$					
	c.	\$					
	d.	\$					
	Total: Add Lines a,	b, c, and d \$					
	Part VIII. VER	RIFICATION					
	I declare under penalty of perjury that the information provided in <i>must sign.</i> )						
57	Date: <b>November 19, 2012</b>	Signature: /s/ Norma Jean Kimbi	rue				
		Norma Joan Kimbruo					

(Debtor)

<sup>\*</sup> Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

## **Current Monthly Income Details for the Debtor**

### **Debtor Income Details:**

Income for the Period 05/01/2012 to 10/31/2012.

### Line 10 - Income from all other sources

Source of Income: Alimony

Income by Month:

6 Months Ago:	05/2012	\$300.00
5 Months Ago:	06/2012	\$300.00
4 Months Ago:	07/2012	\$300.00
3 Months Ago:	08/2012	\$300.00
2 Months Ago:	09/2012	\$300.00
Last Month:	10/2012	\$300.00
	Average per month:	\$300.00

### Non-CMI - Social Security Act Income

Source of Income: Social Security

Income by Month:

6 Months Ago:	05/2012	\$559.00
5 Months Ago:	06/2012	\$559.00
4 Months Ago:	07/2012	\$559.00
3 Months Ago:	08/2012	\$559.00
2 Months Ago:	09/2012	\$559.00
Last Month:	10/2012	\$559.00
	Average per month:	\$559.00